

PTO/SB/50 (06-03)

Approved for use through 01/31/2004. OMB 0951-0033

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REISSUE PATENT APPLICATION TRANSMITTAL

Address to: Mail Stop Reissue Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Attorney Docket No.	1899U029.RE.US
	First Named Inventor	David H. McConville
	Original Patent Number	6,300,439
	Original Patent Issue Date (Month/Day/Year)	October 9, 2001
	Express Mail Label No.	ER 787568114 US

APPLICATION FOR REISSUE OF:

(Check applicable box)



Utility Patent



Design Patent



Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)

1. ☒ Fee Transmittal Form (PTO/SB/58)
(Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims small entity status. See 37 CFR 1.27.
3. ☒ Specification and Claims in double column copy of patent format
(amended, if appropriate)
4. ☐ Drawing(s) (proposed amendments, if appropriate)
5. ☒ Reissue Oath/Declaration (original or copy)
(37 CFR 1.175) (PTO/SB/51 or 52)
6. ☐ Power of Attorney
7. ☒ Original U.S. Patent currently assigned? ☒ Yes ☐ No
(If Yes, check applicable box(es))
 - ☐ Written Consent of all Assignees (PTO/SB/53)
 - ☒ 37 CFR 3.73(b) Statement (PTO/SB/56)
8. ☐ CD-ROM or CD-R in duplicate, Computer Program (Appendix)
or large table
9. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all of the following are necessary)
 - a. ☐ Computer Readable Form (CFR)
 - b. Specification Sequence Listing on:
 - ☐ CD-ROM (2 copies) or CD-R (2 copies); or
 - ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

10. ☐ Statement of status and support for all
changes to the claims. See 37 CFR 1.173(c).
11. ☒ Original Patent Grant
 - ☒ Ribboned Original Patent Grant
 - ☐ Statement of Loss (PTO/SB/55)
12. ☐ Foreign Priority Claim (35 U.S.C. 119)
(if applicable)
13. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS
Citations
14. ☐ English Translation of Reissue Oath/Declaration
(if applicable)
15. ☒ Preliminary Amendment
16. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
17. Other: PTO-2038 (Credit Card Form)

18. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number				OR <input checked="" type="checkbox"/> Correspondence address below
Name	Douglas W. Miller			
Address	c/o Judith A. Kruger 5555 San Felipe, Suite 1950			
City	Houston	State	TX	Zip Code 77503
Country	USA	Telephone	713.780.7799	Fax 713.882.3887

Name (Print/Type)	Douglas W. Miller	Registration No. (Attorney/Agent)	36,808
Signature	<i>Douglas W. Miller</i>	Date	2/12/04

This collection of information is required by 37 CFR 1.173. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/88 (08-03)

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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REISSUE APPLICATION FEE TRANSMITTAL FORM

Docket Number (Optional)

1999U028.RE.US

Claims as Filed - Part 1

	(1) Claims in Patent	(2) Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity	
				Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.18(j))	(A) 14	(B) 14	0	x \$ _____		x \$ _____	
Independent claims (37 CFR 1.16(i))	(C) 1	(D) 1	0	x \$ _____		x \$ _____	
Basic Fee (37 CFR 1.16(h))				\$ _____			\$ 770.00
Total Filing Fee				\$ _____		OR	\$ 770.00

Claims as Amended - Part 2

	(1) Claims Remaining After Amendment	(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
				Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.18(j))	39	MINUS 14	= 25	x \$ _____		x \$ 18 =	450.00
Independent Claims (37 CFR 1.16(i))	4	MINUS 1	= 3	x \$ _____		x \$ 86 =	258.00
Multiple Dependent Fee = \$290.00				Total Additional Fee	\$	OR	\$ 708.00

* If the entry in (D) is less than the entry in (C), Write "0" in column 3.

TOTAL \$1,768.00

** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.

*** After any cancellation of claims.

**** If "A" is greater than 20, use (B - A); If "A" is 20 or less, use (B - 20).

***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

☐ Applicant claims small entity status. See 37 CFR 1.27.☐ Please charge Deposit Account Number _____ in the amount of _____.
A duplicate copy of this sheet is enclosed.☐ The Director is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or
credit any overpayment to Deposit Account Number _____.
A duplicate copy of this sheet is enclosed.☐ A check in the amount of \$ _____ to cover the filing/additional fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

February 12, 2004

Date

36,808

Registration Number, if applicable

Signature of Applicant, Attorney or Agent of Record

Douglas W. Miller

Typed or printed name

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

If you need assistance in completing the form, call 1-800-PTO-9198 and select option 2.

Application No. 09/435,409
Attorney Docket No. 1999U029.RE.US
IDS dated February 12, 2004

We believe that this disclosure complies with the requirements of 37 CFR § 1.56, 1.97 and 1.98 and the Manual of Patent Examining Procedures § 609. If for any reason, the Examiner considers the disclosure or documents to not comply with these sections, notification is respectfully requested.

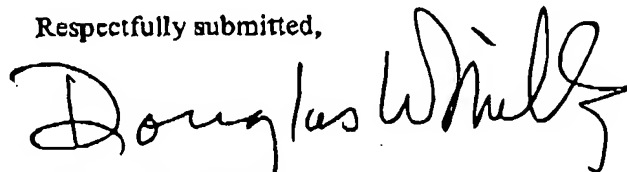
Applicant requests that the Examiner contact the Applicant's Agent if there are any matters or issues outstanding.

Note is made that the correspondence should be sent to:

Douglas W. Miller
In representation of Univation Technologies, LLC
c/o Judith A. Kruger
5555 San Felipe, Suite 1950
Houston, Texas 77056
Facsimile: 713.892.3687

However the telephone number for Douglas W. Miller is (713) 780-7799.

Respectfully submitted,

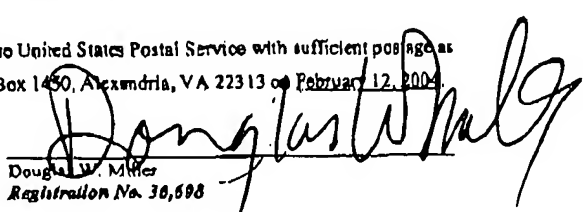


Douglas W. Miller
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CERTIFICATE OF MAILING UNDER 37 CFR 1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313 on February 12, 2004.



Douglas W. Miller
Registration No. 36,608

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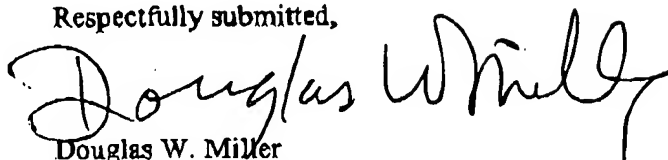
Application No.: 09/435,409
Response dated: February 12, 2004
Reissue Preliminary Amendment

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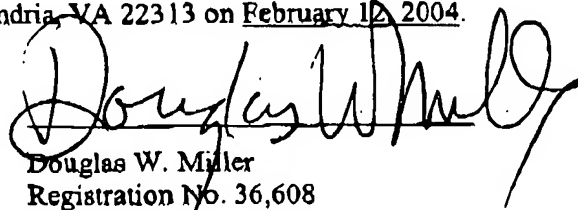


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